

A Study to Assess the Effectiveness of Structured Teaching Programme on Knowledge regarding Preventive Measures of Oral Cancer among Hotel Workers Working at Selected Hotels of Sringeri, Chikkamagaluru, Karnataka

Renuka Amalajari¹, Dr. Sureshgouda S Patil², Dr. U N Dhandargi³

¹Assistant Professor, Department of Medical Surgical Nursing, Shanti Institute of Nursing Sciences Bagalkot

²Principal Shanti Institute of Nursing Sciences Bagalkot

³Principal BES Bagalkot College of Nursing Bagalkot (Corresponding Author)

Abstract: *Background of the study:* Cancer is a non-communicable disease that affects all populations regardless of race, gender, socio economics status or culture. It can originate in any body tissue and affect any cell type. There are significant variations in cancer incidence and types across different regions of the world. Cancer is the second leading cause of death worldwide, highlighting its seriousness. With high incidence and mortality rates, cancer is now recognized as a global health challenge not just a problem for industrialized countries.¹ Oral health is crucial to overall health and quality of life. Good oral health means being free from mouth and facial pain, oral and throat cancers, infections, sores, gum disease, tooth decay/loss and other oral disorders. Poor oral health can impair vital functions like chewing, smiling, speaking, and affect psychosocial wellbeing. The most common oral diseases include oral cancer, dental cavities, gum disease, oral infections, injury-related trauma and hereditary lesions.² Oral cancer is a particularly lethal condition, especially in India, often linked to poor life style choices and harmful habits. It causes approximately 200, 000 deaths annually worldwide, with around 46, 000 deaths in India alone, indicating a serious national health concern.³ **Aim:** The study aimed to assess the effectiveness of structured teaching programme on knowledge regarding prevention of oral cancer among hotel workers. **Objectives of the study:** 1) To assess the knowledge regarding preventive measures of oral cancer before and after implementation of structured teaching programme among hotel workers. 2) To assess the effectiveness of Structured Teaching Programme on knowledge regarding preventive measures of oral cancer among hotel workers. 3) To determine the association between pre-test knowledge regarding preventive measures of oral cancer among hotel workers with their selected socio-demographic variables. **Methodology:** Pre experiment one group pretest posted without control group design was used for the present study, with the objective to assess the effectiveness of structured teaching program on knowledge regarding preventive measures of oral cancer among hotel workers in Sringeri Karnataka. Hotel workers were the sample in the present study, researcher has selected 50 hotel workers by following convenient sampling technique. Researcher has collected the data by structured interview method using structured knowledge questionnaire. **Result:** The overall finding reveals that the post-test mean knowledge score was 26.94 with SD ± 1.76 which was compared to the pre-test mean knowledge score 15.8 with SD ± 3.07 this showed that the post-test knowledge score was significantly higher than pre-test knowledge scores. Hence the STP was found to be effective in enhancing the knowledge of the hotel workers regarding prevention of oral cancer. The calculated "t" value 35.01 was much higher than table "t" value (1.96) hence the hypothesis H_1 stating there will be significant difference in the pre-test knowledge and post-test knowledge scores is accepted at 0.05 level of significance. $p < 0.05$. **Conclusion:** The present study concluded that knowledge of hotel workers regarding preventive measures of oral cancer was poor and the STP has proved to be effective in improving the knowledge.

Keywords: Effectiveness, Knowledge, Structured teaching program, oral cancer, Preventive measures, Socio-demographic variables

1. Introduction

The paper highlights the alarming global cancer burden, with 18.1 million new cases and 9.6 million deaths reported in 2018. Tobacco use is identified as one of the main preventable causes of cancer-related deaths, contributing to about 4 million deaths annually—a figure projected to double by 2020, especially in developing countries. Despite awareness campaigns like "No Tobacco Day" on May 31st, tobacco consumption continues, notably among youth and school children.⁴

The document stresses that tobacco use is a growing global health problem, increasingly starting at younger ages and showing rising prevalence. If current trends persist, it could

lead to 250 million deaths among today's children and adolescents, primarily in developing nations. The Indian Council of Medical Research (ICMR) reports that approximately 1.6 million people in India develop cancer each year due to tobacco use.⁵

2. Methodology

Research approach: An experimental research approach was used in the present study

Research Design: A Pre-Experimental one group pre-test post-test without control group design was used in the present study.

Volume 14 Issue 8, August 2025

Fully Refereed | Open Access | Double Blind Peer Reviewed Journal

www.ijsr.net

Pre-experimental one group pre-test post-test without control group design

Group	Pre-test	Intervention	Post-test
I	O ₁	X	O ₂

Variables:**Dependent Variable:**

The hotel workers knowledge regarding preventive measures of oral cancer

Independent Variable:

The structured teaching programme on knowledge regarding preventive measures of oral cancer among hotel workers.

Socio-demographic Variables:

Age, gender, religion, educational status, place of residence

Setting of study:

The study was conducted in Albhadiya Hotel, Annapurneshwari & Sharadambe hotels at Sringeri.

Population:**Target population:**

The target population of the present study is the hotel workers aged between 20-40 years in Sringeri.

Accessible population:

The accessible population of the present study is the hotel workers aged between 20-40 years working in Albhadiya Hotel, Annapurneshwari & Sharadambe hotels Sringeri.

Sampling technique:

In the present study researcher has used the Non-probable convenient sampling technique to select the Hotels and hotel workers in Sringeri

Sample:

Sample of present study is the hotel workers working in Albhadiya Hotel, Annapurneshwari & Sharadambe hotels in Sringeri.

Sample size:

The sample size for present study comprises is 50 hotel workers.

Sample selection criteria:**Inclusion Criteria:****The present study includes the hotel workers who are**

- Available at the time of data collection
- Willing to participate in the study
- Able to understand Kannada

Exclusion criteria:**The present study excludes the hotel workers who are**

- Sick at the time of data collection
- Not able to cooperate throughout the period of study
- Un co-operative
- Physically handicap that would interfere with the process of data collection
- Severely mentally ill.

Development & Description of Tool:

- Based on review of literature and experts opinion the data collection instrument was prepared to conduct this study
- The instrument consisted of 2 Sections with multiple choice questions
- Section A Consists of 9 Demographic characteristics of sample
- Section B consists of 30 MCQs to assess the knowledge of hotel workers on knowledge regarding preventive measures of oral cancer

Permission:

A formal permission was obtained by institutional ethical committee and from hotel owners. Informed consent was obtained from participants.

3. Results**Results of the present study is categorised into 4 sections as follows****Section I:****Frequency and percentage distribution of hotel workers according to their socio-demographic Characteristics.**

SI. No	Demographic Variables	Category	Frequency	Percentage
1	Age in years	Less than 20 years	22	44%
		21-40 years	15	30%
		41-50 years	07	14%
		More than 50 years	06	12%
2	Gender	Male	28	56%
		Female	22	44%
3	Religion	Hindu	26	52%
		Muslim	13	26%
		Christian	09	18%
		Others	02	04%
4	Educational status	Illiterates	27	54%
		SSLC	13	26%
		PUC	10	20%
5	Monthly income	5000-10000	04	08%
		10000-15000	28	56%
		15000-Anove	18	36%

6	Place of residence	Urban	30	60%
		Rural	20	40%
7	Family history of cancer	Yes	27	54%
		No	23	46%
8	If you have any oral problems? If yes-----	Gum bleeding	16	32%
		Oral thrush	17	34%
		Foul smelling	11	22%
		Ulcers	06	12%
9	Source of information	Family/Friends	20	40%
		Mass media	10	20%
		Books/journals	06	12%
		Health professionals	04	08%

Section II:

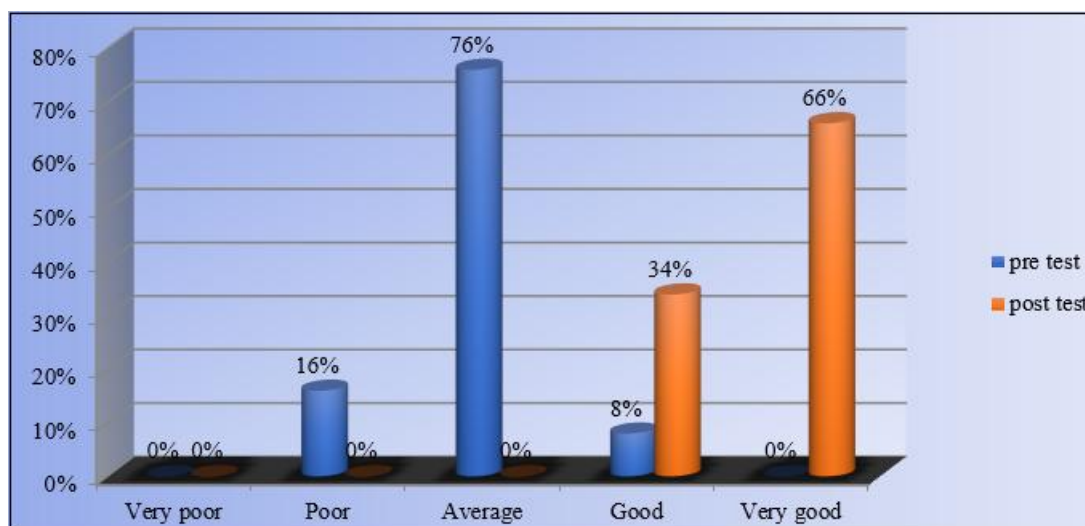
Assessment of knowledge regarding preventive measures of oral cancer

Level of knowledge	Range of score	Frequency	Percentage
Very poor	00-05	00	00
Poor	05-12	08	16
Average	13-19	38	76
Good	20-25	04	08
Very good	26-30	00	00
Total		50	100

Section III:

Effectiveness of STP on knowledge regarding preventive measures of oral cancer among hotel workers

Level of knowledge	Range of score	Pre-test		Post-test	
		Frequency	%	Frequency	%
Very poor	00-05	00	00	00	00
Poor	05-12	08	16	00	00
Average	13-19	38	76	00	00
Good	20-25	04	08	17	34
Very good	26-30	00	00	33	66
Total		50	100	50	100



Significant difference between the pre-test and post-test knowledge scores of hotel workers

Test	Table "t" value	Mean	Std. error	Mean Diff	Sd Diff	Paired "t" value
Pre-Test (X ₁)	1.96	15.88	0.58	11.14	5.06	35.01
Post-Test (X ₂)		26.94				

As the calculated "t" value 35.01 was much higher than table 't' value 26.94 the research hypothesis is accepted. i. e H₁- There will be a significant difference between the pre-test and post-test knowledge scores of hotel workers regarding preventive measures of oral cancer. Findings revealed that post-test knowledge scores are higher than pre-test knowledge score, Hence there is a significant difference

between pre-test and post-test knowledge scores, and structured teaching programme is found to be effective.

Section IV:

Association between Knowledge of hotel workers regarding preventive measures of oral cancer with their selected socio-demographic variables

Volume 14 Issue 8, August 2025

Fully Refereed | Open Access | Double Blind Peer Reviewed Journal

www.ijsr.net

S. No.	Socio demographic variables	DF	Chi-square value	Table value	Level of significance	Inference
1	Age*	1	4.4992	3.84	0.05	S
2	Gender	1	0.0056	3.84	0.05	NS
3	Religion	1	2.6528	3.84	0.05	NS
4	Education	1	0.2412	3.84	0.05	NS
5	Family monthly income	1	3.2085	3.84	0.05	NS
6	Place of Residence		2.3964	3.84	0.05	NS
7	Family history of cancer*	1	6.2412	3.84	0.05	S
8	If you have any oral problems? If Yes*	1	5.056	3.84	0.05	S
9	Source of information	1	3.2085	3.84	0.05	NS

There was a significant association between Knowledge of hotel workers regarding preventive measures of oral cancer and their socio-demographic variables like age, family history of cancer and previous history of oral problems.

4. Conclusion

By above facts and ideas researcher has concluded that there is a need to educate the hotel workers regarding preventive measures of oral cancer. It also concluded that the STP is effective tool in enhancing the knowledge of hotel workers.

5. Recommendations

Based on the findings, the following recommendations are proposed for future research.

- A similar study can be replicated on large scale for the purpose of generalization.
- A similar study can be conducted in National level to bring new programs to uplift the knowledge of hotel workers.
- A comparative study can be conducted on knowledge regarding preventive measures of oral cancer among Urban and Rural adults

Acknowledgement: None

Conflict of Interest: There is no conflict of interest

Source of Funding: Self

Ethical Consideration:

- Ethical clearance is obtained from institutional ethical committee, Sharada Nursing Institute, Sringeri.
- Written consent was obtained from participants.
- Permission was taken from authorized personals to use scales in the present study.
- Privacy, confidentiality and anonymity of the data was maintained.

References

- [1] Park. K., (2005) Park's Text Book of preventive and social medicine (18th edition), Jabalpur, M/s. Banarsidas BanatPublishers, pp.302-310.
- [2] Ferly's J EM, Lam F, Colom bet M, Merry L, Pinero's M, Znaor A, SoerjomataramI Bray F. Global Cancer Observatory: Cancer Today. Lyon, France: International Agency for Research on Cancer. Published2018. Accessed 14 September, 2018
- [3] Jemal A, Siegel R, Xu J, Ward E. Cancer statistics, 2010 [published correction appears in CA Cancer J

Clin.2011 Mar-Apr; 61 (2): 133-4]. CACancerJClin.2010; 60 (5): 277-300. doi: 10.3322/caac.20073.

- [4] Asthana S. Patil RS, Labani S. Tobacco-related cancers in India: A review of incidence reported from population-based cancer registries. Indian J Med Paediatric Oncol.2016; 37 (3): 152-157. doi: 10.4103/0971-5851.190357.
- [5] Flor, L. S., Reitsma, M. B., Gupta, V. et al. The effects of tobacco control policies on global smoking prevalence. NatMed27, 239–243 (2021). <https://doi.org/10.1038/s41591-020-01210-8>